

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARSON AMERICA

A. Full Name (Last, First, Middle Initial)

MR. TED M. BEAL SR.

Mailing Address **112 PINE COVE ROAD**

City FAIR HAVEN	State NJ	Zip Code 07704-3251
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FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
SELF-EMPLOYED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Transaction ID : SA17.532068

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)

COL. ERNEST B. BEALL JR. USMC (

Mailing Address **P. O. BOX 172**

City CONCORD	State NC	Zip Code 28026-0172
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FEC ID number of contributing
federal political committee.

C

Name of Employer
BEALL, INC. (SELF)

Occupation
RETIREMENT INCOME PLANNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

265.00

Transaction ID : SA17.276131

Date of Receipt

M M / D D / Y Y Y Y
07 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

15.00

C. Full Name (Last, First, Middle Initial)

COL. ERNEST B. BEALL JR. USMC (

Mailing Address **P. O. BOX 172**

City CONCORD	State NC	Zip Code 28026-0172
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FEC ID number of contributing
federal political committee.

C

Name of Employer
BEALL, INC. (SELF)

Occupation
RETIREMENT INCOME PLANNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

265.00

Transaction ID : SA17.318625

Date of Receipt

M M / D D / Y Y Y Y
08 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

25.00

Subtotal Of Receipts This Page (optional).....

1040.00

Total This Period (last page this line number only).....